## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1065 0067

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                                  |  |                  |                               |                              |                  |          | SMALL ENTITY TYPE                       |                        | OTHER THAN<br>OR SMALL ENTITY |   |                        |
|---|----------------------------------|--|------------------|-------------------------------|------------------------------|------------------|----------|---|------------------------|-------------------------------|---|------------------------|
| TO  | TAL CLAIMS                       | 79   | 29               |                               |                              |                  | RATE     | FEE                                     | ſ                      | RATE                          | FEE                                     |                        |
| FOR NUMBER FILED  |                                  |  |                  |                               | NUMBI                        | ER EXTRA         |          | BASIC FEE                               | 375.00                 | OR                            | BASIC FEE                               | 750.00                 |
| TOTAL CHARGEABLE CLAIMS 29 minus 20=  |                                  |  |                  |                               | *                            |                  |          | X\$ 9=                                  |                        | OR                            | X\$18=                                  | 160                    |
| INDEPENDENT CLAIMSminus 3 =   |                                  |  |                  |                               | *                            |                  |          | X42=                                    |                        | OR                            | X84=                                    |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                                  |  |                  |                               |                              |                  |          | +140=                                   |                        | OR                            | +280=                                   |                        |
| * If the difference in column 1 is less than zero, enter                              |                                  |  |                  |                               | "0" in c                     | olumn 2          |          | TOTAL                                   |                        | OR                            | TOTAL                                   | 212                    |
| CLAIMS AS AMENDED - PART II   |                                  |  |                  |                               |                              |                  |          | 1017.2                                  |                        | Jorg                          | OTHER                                   | THAN                   |
|   | (Column 1) (Column 1)            |  |                  |                               |                              | (Column 3)       |          | SMALL E                                 | NTITY                  | OR                            | SMALL                                   |                        |
| AMENDMENT A   |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |          | RATE                                    | ADDI-<br>TIONAL<br>FEE |                               | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|   | Total                            | *  | Minus            | **                            |                              | =                |          | X\$ 9=                                  |                        | OR                            | X\$18=                                  |                        |
|   | Independent                      | *  | Minus            | ***                           |                              | =                |          | X42=                                    |                        | OR                            | X84=                                    |                        |
| L   | FIRST PRESE                      | NTATION OF M   | ULTIPLE DEP      | ENDEN                         | CLAIM                        |                  | ]        | +140=                                   |                        | OR                            | +280=                                   |                        |
|   |                                  |  |                  |                               |                              |                  |          | TOTAL<br>ADDIT. FEE                     |                        |                               | TOTAL                                   |                        |
|   | (Column 1) (Column 2) (Column 3) |  |                  |                               |                              |                  |          |   |                        |                               | ADDIT. FEE                              |                        |
| AMENDMENT B   |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                  | HIGH<br>NUM<br>PREVI          |                              | PRESENT<br>EXTRA |          | RATE                                    | ADDI-<br>TIONAL<br>FEE |                               | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|   | Total                            | *  | Minus            | **                            |                              | =                |          | X\$ 9=                                  |                        | OR                            | X\$18=                                  |                        |
|   | independent                      | *  | Minus            | ***                           |                              | =                |          | X42=                                    |                        | OR                            | X84=                                    |                        |
| Ľ   | FIRST PRESE                      | NTATION OF M   | ULTIPLE DEP      | ENDEN                         | I CLAIM                      |                  | ]        | +140=                                   |                        | OR                            | +280=                                   |                        |
|   |                                  |  |                  |                               |                              |                  | ļ        | TOTAL<br>ADDIT. FEE                     |                        | ΛP                            | TOTAL<br>ADDIT. FEE                     |                        |
|   |                                  | (Column 1)   |                  | (Colu                         | mn 2)                        | (Column 3)       |          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        | -                             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| AMENDMENT C   |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                  | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                                    | ADDI-<br>TIONAL<br>FEE |                               | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|   | Total                            | *  | Minus            | **                            |                              | =                |          | X\$ 9=                                  |                        | OR                            | X\$18=                                  | ·                      |
|   | Independent                      | *  | Minus            | ***                           |                              | =                | <b>↓</b> | X42=                                    |                        | OR                            | X84=                                    |                        |
| L   | FIRST PRESE                      | NTATION OF M   | ULTIPLE DEF      | PENDEN                        | T CLAIM                      |                  |          | +140=                                   |                        |                               | +280=                                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                  |  |                  |                               |                              |                  |          |   |                        |                               | TOTAL                                   |                        |
| Arte  | If the "Highest Nu               | mber Previously F<br>Imber Previously P<br>Inber Previously Pa | Paid For" IN THI | S SPACE                       | is less that                 | an 3, enter "3." | ,        | ADDIT. FEE                              | oropriate bo           | OR                            | ADDIT. FEE                              |                        |